

| POSITION | INITIALS | ID NO. | DATE |
|---------------------------|------------|----------|-----------|
| FEE DETERMINATION | Robert (2) | 19/11/21 | 10-11-01 |
| O.I.P.E. CLASSIFIER | | 11/21 | 10/24 |
| FORMALITY REVIEW | K.D | | 11-9-2001 |
| RESPONSE FORMALITY REVIEW | | | |

INDEX OF CLAIMS

✓ Rejected
 = Allowed
 - (Through numeral)... Canceled
 + Restricted
 N Non-elected
 I Interference
 A Appeal
 O Objected

| Claim | Date |
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If more than 150 claims or 10 actions
staple additional sheet her

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